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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))</small>	Attorney Docket No.	PD-00W014
	First Inventor or Application Identifier	Allison
	Title	Multi-Bit Phase Shifters Using MEM RF Switch
	Express Mail Label No.	EK444529177US

<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents.</small>	<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small> 2. <input checked="" type="checkbox"/> Specification [Total Pages 32] <small>(preferred arrangement set forth below)</small> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 11] 4. Oath or Declaration [Total Pages 3] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) <small>(for continuation/divisional with Box 16 completed)</small> i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).	5. <input type="checkbox"/> Microfiche Computer Program (Appendix) 6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies
<b>ACCOMPANYING APPLICATION PARTS</b>	
7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 8. <input checked="" type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small> 9. <input type="checkbox"/> English Translation Document (if applicable) 10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations 11. <input type="checkbox"/> Preliminary Amendment 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small> 13. <input type="checkbox"/> * Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application, Status still proper and desired <small>(PTO/SB/09-12)</small> 14. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small> 15. <input type="checkbox"/> Other:	
<p><b>* NOTE FOR ITEMS 1 &amp; 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).</b></p>	

**16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:**

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_ Group / Art Unit: \_\_\_\_\_

**For CONTINUATION or DIVISIONAL APPS only:** The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**17. CORRESPONDENCE ADDRESS**

☐ Customer Number or Bar Code Label ☒ Correspondence address below

(Insert Customer No. or Attach bar code label here)

Name	Leonard A. Alkov, Esq.				
	Raytheon Company				
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Country	U.S.A.	Telephone	310.647.2577	Fax	310.647.2616

Name (Print/Type)	Leonard A. Alkov	Registration No. (Attorney/Agent)	30,021
Signature	<i>Leonard A. Alkov</i>	Date	06/30/00

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 1999</h2> <p style="font-size: small; margin: 5px 0;">Patent fees are subject to annual revision. Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.</p>		<p><i>Complete if Known</i></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Application Number</td><td></td></tr> <tr><td>Filing Date</td><td></td></tr> <tr><td>First Named Inventor</td><td>Allison</td></tr> <tr><td>Examiner Name</td><td></td></tr> <tr><td>Group / Art Unit</td><td></td></tr> <tr><td>Attorney Docket No.</td><td>PD-00W014</td></tr> </table>		Application Number		Filing Date		First Named Inventor	Allison	Examiner Name		Group / Art Unit		Attorney Docket No.	PD-00W014
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TOTAL AMOUNT OF PAYMENT		(\$ ) 880.00													

<h3 style="text-align: center; margin: 0;">METHOD OF PAYMENT (check one)</h3> <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</p> <p>Deposit Account Number <span style="border: 1px solid black; padding: 2px;">50-0616</span></p> <p>Deposit Account Name <span style="border: 1px solid black; padding: 2px;">Raytheon Company</span></p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p>2. <input type="checkbox"/> Payment Enclosed:  <input type="checkbox"/> Check    <input type="checkbox"/> Money Order    <input type="checkbox"/> Other</p> <h3 style="text-align: center; margin: 10px 0;">FEE CALCULATION</h3> <div style="border: 1px solid black; padding: 5px;"> <h4 style="margin: 0;">1. BASIC FILING FEE</h4> <table style="width: 100%; font-size: x-small;"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>101 760</td><td>201 380</td><td>Utility filing fee</td><td style="border: 1px solid black; text-align: right;">690.00</td></tr> <tr><td>106 310</td><td>206 155</td><td>Design filing fee</td><td style="border: 1px solid black;"></td></tr> <tr><td>107 480</td><td>207 240</td><td>Plant filing fee</td><td style="border: 1px solid black;"></td></tr> <tr><td>108 760</td><td>208 380</td><td>Reissue filing fee</td><td style="border: 1px solid black;"></td></tr> <tr><td>114 150</td><td>214 75</td><td>Provisional filing fee</td><td style="border: 1px solid black;"></td></tr> </tbody> </table> <p style="text-align: right; margin-top: 5px;"><b>SUBTOTAL (1) (\$ ) 690.00</b></p> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <h4 style="margin: 0;">2. EXTRA CLAIM FEES</h4> <table style="width: 100%; font-size: x-small;"> <tr> <td>Total Claims</td> <td><span style="border: 1px solid black; padding: 0 10px;">24</span></td> <td>-20** =</td> <td><span style="border: 1px solid black; padding: 0 10px;">4</span></td> <td>X</td> <td>Fee from below</td> <td><span style="border: 1px solid black; padding: 0 10px;">18.00</span></td> <td>=</td> <td><span style="border: 1px solid black; padding: 0 10px;">72.00</span></td> </tr> <tr> <td>Independent Claims</td> <td><span style="border: 1px solid black; padding: 0 10px;">4</span></td> <td>-3** =</td> <td><span style="border: 1px solid black; padding: 0 10px;">1</span></td> <td>X</td> <td>Fee from below</td> <td><span style="border: 1px solid black; padding: 0 10px;">78.00</span></td> <td>=</td> <td><span style="border: 1px solid black; padding: 0 10px;">78.00</span></td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> <p style="font-size: x-small; margin-top: 5px;">**or number previously paid, if greater; For Reissues, see below</p> <table style="width: 100%; font-size: x-small;"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>103 18</td><td>203 9</td><td>Claims in excess of 20</td><td style="border: 1px solid black;"></td></tr> <tr><td>102 78</td><td>202 39</td><td>Independent claims in excess of 3</td><td style="border: 1px solid black;"></td></tr> <tr><td>104 260</td><td>204 130</td><td>Multiple dependent claim, if not paid</td><td style="border: 1px solid black;"></td></tr> <tr><td>109 78</td><td>209 39</td><td>** Reissue independent claims over original patent</td><td style="border: 1px solid black;"></td></tr> <tr><td>110 18</td><td>210 9</td><td>** Reissue claims in excess of 20 and over original patent</td><td style="border: 1px solid black;"></td></tr> </tbody> </table> <p style="text-align: right; margin-top: 5px;"><b>SUBTOTAL (2) (\$ ) 150.00</b></p> </div>	Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid	101 760	201 380	Utility filing fee	690.00	106 310	206 155	Design filing fee		107 480	207 240	Plant filing fee		108 760	208 380	Reissue filing fee		114 150	214 75	Provisional filing fee		Total Claims	<span style="border: 1px solid black; padding: 0 10px;">24</span>	-20** =	<span style="border: 1px solid black; padding: 0 10px;">4</span>	X	Fee from below	<span style="border: 1px solid black; padding: 0 10px;">18.00</span>	=	<span style="border: 1px solid black; padding: 0 10px;">72.00</span>	Independent Claims	<span style="border: 1px solid black; padding: 0 10px;">4</span>	-3** =	<span style="border: 1px solid black; padding: 0 10px;">1</span>	X	Fee from below	<span style="border: 1px solid black; padding: 0 10px;">78.00</span>	=	<span style="border: 1px solid black; padding: 0 10px;">78.00</span>	Multiple Dependent									Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid	103 18	203 9	Claims in excess of 20		102 78	202 39	Independent claims in excess of 3		104 260	204 130	Multiple dependent claim, if not paid		109 78	209 39	** Reissue independent claims over original patent		110 18	210 9	** Reissue claims in excess of 20 and over original patent		<h3 style="text-align: center; margin: 0;">FEE CALCULATION (continued)</h3> <h4 style="margin: 0;">3. ADDITIONAL FEES</h4> <table style="width: 100%; font-size: x-small;"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105 130</td><td>205 65</td><td>Surcharge - late filing fee or oath</td><td style="border: 1px solid black;"></td></tr> <tr><td>127 50</td><td>227 25</td><td>Surcharge - late provisional filing fee or cover sheet.</td><td style="border: 1px solid black;"></td></tr> <tr><td>139 130</td><td>139 130</td><td>Non-English specification</td><td style="border: 1px solid black;"></td></tr> <tr><td>147 2,520</td><td>147 2,520</td><td>For filing a request for reexamination</td><td style="border: 1px solid black;"></td></tr> <tr><td>112 920*</td><td>112 920*</td><td>Requesting publication of SIR prior to Examiner action</td><td style="border: 1px solid black;"></td></tr> <tr><td>113 1,840*</td><td>113 1,840*</td><td>Requesting publication of SIR after Examiner action</td><td style="border: 1px solid black;"></td></tr> <tr><td>115 110</td><td>215 55</td><td>Extension for reply within first month</td><td style="border: 1px solid black;"></td></tr> <tr><td>116 380</td><td>216 190</td><td>Extension for reply within second month</td><td style="border: 1px solid black;"></td></tr> <tr><td>117 870</td><td>217 435</td><td>Extension for reply within third month</td><td style="border: 1px solid black;"></td></tr> <tr><td>118 1,360</td><td>218 680</td><td>Extension for reply within fourth month</td><td style="border: 1px solid black;"></td></tr> <tr><td>128 1,850</td><td>228 925</td><td>Extension for reply within fifth month</td><td style="border: 1px solid black;"></td></tr> <tr><td>119 300</td><td>219 150</td><td>Notice of Appeal</td><td style="border: 1px solid black;"></td></tr> <tr><td>120 300</td><td>220 150</td><td>Filing a brief in support of an appeal</td><td style="border: 1px solid black;"></td></tr> <tr><td>121 260</td><td>221 130</td><td>Request for oral hearing</td><td style="border: 1px solid black;"></td></tr> <tr><td>138 1,510</td><td>138 1,510</td><td>Petition to institute a public use proceeding</td><td style="border: 1px solid black;"></td></tr> <tr><td>140 110</td><td>240 55</td><td>Petition to revive - unavoidable</td><td style="border: 1px solid black;"></td></tr> <tr><td>141 1,210</td><td>241 605</td><td>Petition to revive - unintentional</td><td style="border: 1px solid black;"></td></tr> <tr><td>142 1,210</td><td>242 605</td><td>Utility issue fee (or reissue)</td><td style="border: 1px solid black;"></td></tr> <tr><td>143 430</td><td>243 215</td><td>Design issue fee</td><td style="border: 1px solid black;"></td></tr> <tr><td>144 580</td><td>244 290</td><td>Plant issue fee</td><td style="border: 1px solid black;"></td></tr> <tr><td>122 130</td><td>122 130</td><td>Petitions to the Commissioner</td><td style="border: 1px solid black;"></td></tr> <tr><td>123 50</td><td>123 50</td><td>Petitions related to provisional applications</td><td style="border: 1px solid black;"></td></tr> <tr><td>126 240</td><td>126 240</td><td>Submission of Information Disclosure Stmt</td><td style="border: 1px solid black;"></td></tr> <tr><td>581 40</td><td>581 40</td><td>Recording each patent assignment per property (times number of properties)</td><td style="border: 1px solid black; 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SUBMITTED BY				Complete (if applicable)	
Typed or Printed Name		Leonard A. Alkov		Reg. Number	
Signature				30,021	
Date		06/30/00		Deposit Account User ID	
				50-0616	